## SPECIFIC WAIVER REQUEST

## California High School Exit Examination (CAHSEE): Waiver of Test Passage for Students With a Disability

SW-1 (5/01) http://www.cde.ca.gov/waiver/

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Send Original plus one copy to:

Waiver Office, California Department of Education

1430 N Street, Suite 5602 Sacramento, CA 95814

## Faxed originals will not be accepted!

Sacramento, CA 95814	_		
		CDS CODE	
<b></b>			
LEA:	Contact/recipient of approval/denial notice:	Contact Person's E-Mail Address:	
Address: (Street) (City)	(State) (ZIP)	Phone (and extension, if necessary):	
(1.3)	(,	( ) - x	
		Fax Number: ( ) -	
	LEGAL CRITERIA		
1. Authority for the Waiver: ☐ Specific Content of the waiver is necessary or beneficial	Code Section: <u>E.C. 56101</u> to the content and implementation of the pupil's:	individualized education program	
		_	
2. Education Code or California Code of R		Lyon and analysahaal your thomaston analy	
	ovides that "Commencing with the 2003-04 school struly pass the exit examination as a condition of		
condition of graduation from high scho		receiving a dipionia of graduation of a	
condition of graduation from high sent	501.		
3. Desired Outcome/rationale: Waiver	of the "successful passage of the CAHSEE," for s	specified students listed below (first name,	
last initial only): ( Attach additional lis			
•	•		
District Control Control	7.0.00000000000000000000000000000000000		
	<b>E.C. 56500 - Certification</b> – I hereby certify that the is	nformation provided on this application is	
correct and complete.  Signature of Authorizing Official:	Title:	Date:	
Signature of Authorizing Official.	Title.	Date.	
>			
	ALIFORNIA DEPARTMENT OF EDUCATION US	SE ONLY	
Staff Name (type or print):	Staff Signature:	Date:	
Unit Manager (type or print):	Unit Manager Signature:	Date:	
Omt Manager (type or prim):	Ont Manager Signature:	Date.	
	>		
Division Director (type or print):	Division Director Signature:	Date:	
Con Con Printer	-		
	>		
Deputy (type or print):	Deputy Signature:	Date:	
		•	

CAHSEE Waiver Cover Sheet: Information on the Specific Student with a Disability			
Student's First Name And Last Name Initial Only			
1. Describe the nature of the student's disability as identified on the IEP or Section 504 Plan (Please note if this will result in overt identification of the student.)			
2. Modification Used on:   ELA Test	☐ Math Test		
Describe modification(s) used on the ELA test.	Describe modification(s) used on the Math test.		
3. List the rationale as to why the modification(s) used to achieve the equivalent passing score on the CAHSEE was necessary to allow the student to access the test.			
4. Give a description of the accommodations/modifications that the student regularly uses in the classroom and on other assessments.			
ELA	Math		
5. Summarize the student's academic preparation and performance that demonstrates high school level achievement. This summary should be limited to course descriptions and information in the subject area(s) of ELA and/or Math, depending on the waiver being requested for the student.			
I, certify that the student attained the equivalent of a passing score upon completing the English language arts and/or mathematics sections of the CAHSEE using a modification that has been determined to "fundamentally alter what the test measures." (Attach copy of the student's CAHSEE score report.)			
"Equivalent of a passing score" (350 or more poi Certified:	nts):		
Certified.	Title.		
Attach to this cover sheet the following:  1. An IEP or Section 504 Plan (PLEASE BLACK OUT STUDENT AND PARENT LAST NAME – First Name and Last Name Initial Only) reviewed and approved by the student's IEP team and parent dated prior to the exam, that indicates all of the accommodations and/or modifications that the student needs to access and participate in statewide assessments; and  2. A certified transcript (PLEASE BLACK OUT STUDENT'S LAST NAME – First Name and Last Name Initial Only) showing sufficient high school level coursework (either satisfactorily completed or in progress) in a high-school level curriculum sufficient to have gained the skills and knowledge otherwise needed to pass the CAHSEE; and  3. A copy of the CAHSEE Student and Parent Report (PLEASE BLACK OUT STUDENT'S LAST NAME – First Name and Last Name Initial Only) showing "equivalent of a passing score."			